

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) BOEHMERP-0043
Application Number 10/551,298		Filed September 23, 2005
For DETERMINATION OF A MID-REGIONAL PROADRENOMEDULLIN PARTIAL PEPTIDE...		
Art Unit 1641		Examiner Christine E. Foster

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	_____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	_____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	<u>1110.00</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	_____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	_____

☐ Applicant claims small entity status. See 37 CFR 1.27.  
☐ A check in the amount of the fee is enclosed.  
☒ Payment by credit card via EFS. (3<sup>rd</sup> Month only - \$620.00)  
☐ The Director has already been authorized to charge fees in this application to a Deposit Account.  
☒ The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number 13-3402.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent. Registration Number 27,969.

☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. \_\_\_\_\_.

/Anthony J. Zelano/  
\_\_\_\_\_  
Signature  
Anthony J. Zelano  
\_\_\_\_\_  
Typed or printed name

August 17, 2011  
\_\_\_\_\_  
Date  
(703) 243-6333  
\_\_\_\_\_  
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.